

NJHOMES ABC Program Application

When you submit this form, it will not automatically collect your details like name and email address unless you provide it yourself.

* Required

1. First Name *

Enter your answer

2. Last Name *

Enter your answer

3. Municipality *

Enter your answer

4. Title *

Enter your answer

5. Phone number *

Enter your answer

6. Email address *

Enter your answer

7. Please describe the goals you seek to accomplish through your participation in NJHOMES ABC Program *

Enter your answer

8. What type of strategies would your town like to employ to meet your affordable housing responsibilities (i.e. non-profit development partnerships, life cycle housing, planning and zoning changes etc.) *

Enter your answer

9. What are some of the chief obstacles your municipality faces in achieving your affordable housing goals *

Enter your answer

10. What type of municipal commitments can you make towards affordable development (i.e. land, funds, in-kind resources etc.) *

Enter your answer

11. Is there anything else you would like us to know that will support your participation in the ABC program

Enter your answer



This content is created by the owner of the form. The data you submit will be sent to the form owner. Microsoft is not responsible for the privacy or security practices of its customers, including those of this form owner. Never give out your password.

Microsoft Forms | AI-Powered surveys, quizzes and polls [Create my own form](#)

The owner of this form has not provided a privacy statement as to how they will use your response data. Do not provide personal or sensitive information. | [Consumer Health Privacy](#) | [Terms of use](#)